

DEC 08 2005

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Deliver to: John C. Hong Art Group: 3726
Company Name: USPTO
Facsimile No.: (571) 273-8300 Date: December 8, 2005
From: Paul A. Mendonsa, Reg. No. 42,879
Our Docket No.: 7679P005 Number of pages 6 including this sheet.
Application: 10/717,053 Filing Date: 11/18/2003

SubjectRemarks

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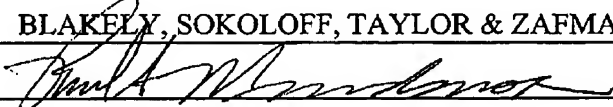
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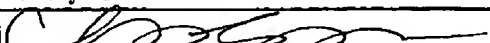
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application No.	10/717,053	
	Filing Date	November 18, 2003	
	First Named Inventor	Harold Gene Alles	
	Art Unit	3726	
	Examiner Name	John C. Hong	
Total Number of Pages in This Submission		Attorney Docket Number	7679P005

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Paul A. Mendonsa, Reg. No. 42,879 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	December 8, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Cheryl Ledbetter		
Signature		Date	December 8, 2005

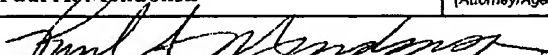
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DEC 08 2005

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	10/717,053
		Filing Date	November 18, 2003
		First Named Inventor	Harold Gene Alles
		Examiner Name	John C. Hong
		Art Unit	3726
		Attorney Docket No.	7679P005
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
TOTAL AMOUNT OF PAYMENT	(\$)	0.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input checked="" type="checkbox"/> Credit any overpayments	

Large Entity		Small Entity		Fee Description	Fee Paid	
Fee Code	Fee (\$)	Fee Code	Fee (\$)			
1051	130	2051	65	Surcharge - late filing fee or oath		
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.		
2053	130	2053	130	Non-English specification		
1251	120	2251	60	Extension for reply within first month		
1252	450	2252	225	Extension for reply within second month		
1253	1,020	2253	510	Extension for reply within third month		
1254	1,590	2254	795	Extension for reply within fourth month		
1255	2,160	2255	1,080	Extension for reply within fifth month		
1401	500	2401	250	Notice of Appeal		
1402	500	2402	250	Filing a brief in support of an appeal		
1403	1,000	2403	500	Request for oral hearing		
1451	1,510	2451	1,510	Petition to institute a public use proceeding		
1460	130	2460	130	Petitions to the Commissioner		
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
1806	180	1806	180	Submission of Information Disclosure Stmt		
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))		
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))		
Other fee (specify) <u>Power of Attorney/no fee</u>					0.00	
SUBTOTAL (2)					(\$)	0.00

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879
Signature		Telephone	(503) 439-8778
		Date	12/08/05

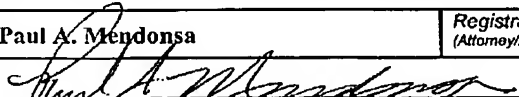
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FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		<i>Complete if Known</i>	
		Application Number	10/717,053
		Filing Date	November 18, 2003
		First Named Inventor	Harold Gene Alles
		Examiner Name	John C. Hong
		Art Unit	3726
		Attorney Docket No.	7679P005
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
TOTAL AMOUNT OF PAYMENT	(\$)	0.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION					
Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
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1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) <u>Power of Attorney/no fee</u>					0.00
SUBTOTAL (2)					(\$) 0.00

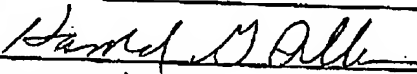
SUBMITTED BY		<i>Complete (if applicable)</i>	
Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879
Signature		Telephone	(503) 439-8778
		Date	12/08/05

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS		Application No. 107717,053 Filing Date November 18, 2003 First Named Inventor Harold Gene Alles Group Art Unit 3726 Examiner Name John C. Hong Attorney Docket Number 7679P005
I hereby revoke all previous powers of attorney given in the above-identified application:		
<input checked="" type="checkbox"/> A Power of Attorney is submitted herewith. OR <input checked="" type="checkbox"/> I hereby appoint the practitioners associated with Customer Number: 08791		
<input checked="" type="checkbox"/> Please change the correspondence address for the above-identified application to: <input checked="" type="checkbox"/> The address associated with Customer Number: 08791 OR		
<input type="checkbox"/> Firm or Individual Name Address Address City Country	BLAKELY, SOKOLOFF, TAYLOR & ZAPMAN LLP 12400 Wilshire Boulevard, 7th Floor Los Angeles State California Zip Code 90025 U.S.A. Telephone (503) 439-8778 Fax (503) 439-6073	
I am the: <input type="checkbox"/> Applicant. <input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under of 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
SIGNATURE of Applicant or Assignee of Record		
Name	Harold G. Alles	
Signature		
Date	12/5/05	
NOTE: Signatures of all the inventor or assignee of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of _____ forms are submitted.		

Based on PTO/SB/02 (04-05) as modified by BSTZ (11/30/2005 - WLR)
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

STATEMENT UNDER 37 CFR 3.73(b)

Docket No. 7679P005

Applicant/Patent Owner: Home Comfort Zones, Inc.

Application No./Patent No.: 10/717,053

Filing/Issue Date: 11/18/2003

Entitled: Installation of a Retrofit HVAC Zone Climate Control System

Home Comfort Zones, Inc., a Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel 014789, Frame 0343, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

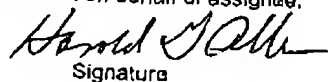
1. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
4. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8]

The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of assignee.

12/05/05
Date


Signature

Harold G. Alles
Typed or printed name
Chief Executive Officer
Title

Based on PTO/SB/88 (08-03) as modified by Bigsby, Satzloff, Taylor & Zeffman (wk) 05/05/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22312-1450.